

**477-000-012 – Income levels/Federal Poverty Levels and Resources**

**Program Standards, Federal Poverty Levels, and Maximum Income (Effective 1/1/15)**

HH SIZE	SON Former Ward/IMD	SON Parent/ Caretaker Relatives	MNIL/ MA	100% FPL AABD QMB MSP/QMB	133% FPL Children ages 6-18	145% FPL Children ages 1-5	162% FPL Newborns to age 1
1	492	569	392	981	1,305	1,422	1,589
2	527	704	392	1,328	1,766	1,926	2,151
3	661	841	492	1,674	2,226	2,427	2,712
4	788	976	584	2,021	2,688	2,930	3,274
5	914	1,112	675	2,368	3,149	3,434	3,836
6	1,048	1,247	775	2,714	3,610	3,935	4,397
7	1,175	1,383	867	3,061	4,071	4,438	4,959
8	1,301	1,620	967	3,408	4,533	4,912	5,521
9	1,427	1,753	1,059	3,754	4,993	5,443	6,081
10	1,553	1,886	1,150	4,101	5,454	5,946	6,644
+	+126	+133	+91				

HH SIZE	185% FPL TMA	194% FPL PREGNANT WOMEN PRESUM	197% FPL 599 CHIP	200% FPL MIWD	213% FPL CHIP	250% FPL MIWD, with Premium	275% FPL S-CHIP
1	1,815	1,903	1,933	1,962	2,090	2,453	2,698
2	2,457	2,576	2,616	2,656	2,829	3,320	3,652
3	3,097	3,248	3,298	3,348	3,566	4,185	4,604
4	3,739	3,921	3,981	4,042	4,305	5,053	5,558
5	4,381	4,594	4,665	4,736	5,044	5,920	6,512
6	5,021	5,265	5,347	5,428	5,781	6,785	7,464
7	5,663	5,938	6,030	6,122	6,520	7,653	8,418
8	6,305	6,612	6,714	6,816	7,259	8,520	9,372
9	6,945	7,283	7,395	7,508	7,996	9,385	10,324
10	7,587	7,956	8,079	8,202	8,735	10,253	11,278

## Resource and Income Limits

### AABD/MA

Number of Individuals	Resource Limit	Shelter Allowance Resource Limit	Maximum for Burial Trust
1	\$4,000	\$281	\$4,916
2	\$6,000	\$349	\$4,916

### SLMB and QI-1

Number of Individuals SLMB – 120% FPL	Income Limit	Number of Individuals QI-1 – 135% FPL	Income Limit
1	\$1,177	1	\$1,324
2	\$1,593	2	\$1,793

### MSP/QMP, SLMB and QI-1

Number of Individuals	Resource Limit
1	\$7,280
2	\$10,930

Eligibility for payment of Medicare cost sharing is effective the first day of the month after the month in which QMB status is first determined. For example, if you determine an individual meets all eligibility requirements for QMB status on August 15<sup>th</sup>, the effective date of eligibility for payment of premiums, deductibles, and co-insurance is September 1. However, in no case are benefits effective prior to January 1, 1989, which is the effective date of this provision. Retroactive eligibility is precluded under this provision.

QI's cannot be otherwise eligible for any other Medicaid category. The individual must choose either medically needy/SOC or QI. Retroactive eligibility (up to 3 months prior to application) applies if:

1. The individual met all QI eligibility criteria in the retroactive period; and
2. The retroactive period is no earlier than January 1 of that calendar year.

QIs are eligible if their incomes are at least 120% of the FPL, but less than 135% of the FPL.

### Spousal Impoverishment

150% FPL (DA-4M)	Community Spouse - \$1,992
Excess Shelter Limit (DA-4M)	\$598
Utility Standard (DA-4M)	\$434
Maximum Maintenance Allowance for Ineligible Spouse	\$2,981
Resource Minimum	\$23,844
Resource Maximum	\$119,220

### Facility Standard of Need

NH	\$50
	Effective 9/1/15 \$60
ALF	\$64 + R&B
VA	\$90 + \$50
	Effective 9/1/15 \$90 + \$60
ALW	\$733

### Social Security Income (SSI)

Number of Individuals	Referral Level	Federal Benefit Rate (FBR)
1	\$753	\$733
2	\$1,120	\$1,100

### Medicare Premium

\$104.90
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